

ALCOHOLIC BEVERAGES — GAMBLING OPERATOR COMBINED ON-PREMISES LICENSE APPLICATION

For the purposes of this application, **Gambling Control Division** is referred to as **GCD** and **Liquor Control Division** is referred to as **LCD**.

Apply online! https://revenue.mt.gov/apply-electronically

FOR ADDITIONAL ASSISTANCE, PLEASE SEE THE GUIDE AT THE END OF THIS APPLICATION

Our websites:

www.dojmt.gov/gaming www.revenue.mt.gov/home/liquor

FOR OFFICE USE ONLY: FORM 5 **ALCOHOLIC BEVERAGES – GAMBLING OPERATOR** Gambling License No: **COMBINED ON-PREMISES LICENSE APPLICATION** Liquor License No: Check Number: Gambling Fee Paid: Section I Liquor Fee Paid: Fingerprint Fee Paid: **PURPOSE AND FEES** Please check all appropriate sections below: New Alcoholic Beverages License Application **New Gambling License** Existing Alcoholic Beverage License Gambling License Only (Alcoholic Beverage License is Transfer of Ownership not required for Live Keno/Bingo) Transfer of Ownership and Location Amended Gambling License **Corporate Structure Change Gambling Operator License Processing Fees: Fees Due for Fees Due for Enter Amount** 1. **Existing License** New License Due Nonprofit Organization 300.00 300.00 П Sole Proprietorship 800.00 800.00 Partnership or Corporation 1,000.00 1,000.00 **Alcoholic Beverages License Processing Fees:** All Alcoholic Beverages License Applications 400.00 400.00 **Alcoholic Beverages License Fees:** 3. Beer 200.00 N/A Add Wine Amendment to Existing Beer Only License 200.00 N/A N/A 400.00 Beer/Wine П All-Beverage (depending on location and population) N/A 400.00 - 800.00 Restaurant Beer/Wine PLUS Seating Fees: 400.00 + N/A unless seating 60 or less seats 5,000.00 increases beyond 61 - 100 seats 10.000.00 current license

Based on the actual cost incurred by the GCD in processing the license, GCD will refund any overpayment of the fee or collect an amount sufficient to reimburse GCD for any underpayment of actual costs. GCD will provide the applicant an itemized accounting of expenses.

All-Beverage (depending on location and population)

Golf Course Beer/Wine (includes \$400 annual fee)

Beer/Wine

Other Licenses and Fees:

Beer

4.

5.

П

П

П

101 or more seats

Veterans'/Fraternal Organizations License Fees:

Catering Endorsement for Beer/Wine

Resort (includes \$2000 annual fee)

NonProfit Golf Course

Secured Party Addition

Fingerprint Fee (per individual)

Catering Endorsement for All-Beverage

Questions?
Please see the Form 5 Guide
or contact the GCD
at (406) 444-1971

20,000.00

50.00

250.00

200.00

250.00

400.00

50.00

27.25 **TOTAL**

20,000.00

20,000.00

250.00 - 650.00

N/A

N/A

N/A

N/A

N/A

N/A

N/A

N/A

50.00

27.25

STAPLE PAYMENT HERE
Payable to:
GAMBLING CONTROL DIVISION

This application may be completed online by visiting https://revenue.mt.gov/apply-electronically **Mail application to:** Department of Justice

Gambling Control Division 2550 Prospect Avenue PO Box 201424 Helena MT 59620-1424

Section II

GENERAL INFORMATION

Name of	Entity or pplying			
reison A		tnerships/Cor	o/LLC/LLP e.g. Swanny's Bar	LLC)
Business	Name			
Premises				
Licensed	Street, Suite No	City		Zip
Mailing Address				
	Street, Suite No	City	State	Zip
Business		Cell Phone		
Fax		Email		
FEIN			☐ Check this box if you	wish to receive annual
	 N/A (if sole proprietor who will not require hired staff) cense Number (write "NEW" if new license application 	ion)	renewals electronica	
1	ATTORNEY eck this box and complete below information i so submitted this application on your behalf			nce sent to the attorney
Attorne	ey Name	_ Business	Phone	
Mailing Addres				
/ taures	Street, Suite No	City	State	Zip
Email A	Address			
The prem	nises for licensing is located within:			
□ the b	oundaries of an incorporated city/town			
□ a dist	tance of five miles of an incorporated city/tov	vn		
	nincorporated city/town or outside the bound whether incorporated or unincorporated	laries of, ar	d more than five miles	distance from any city/
City of _		County of		

Section III

OWNERSHIP & MANAGEMENT INFORMATION

Ownership Type:			
	Are any individuals and/or partners		
☐ Individual(s)/Sole Proprietor(s)	Joint Tenants with Rights of Survivorship (JTROS)?		
☐ General Partnership			
☐ Limited Partnership	□ No □ Yes		
☐ Limited Liability Company			
☐ Limited Liability Partnership			
	d under 26 U.S.C. 501(c)(3), (c)(4), (c)(8) or (c)(9)		
□ Retirement home or nursing home (Gambling	(Only)		
☐ C Corporation			
□ Subchapter S Corporation			
 Publicly Held Corporation 			
and FEIN for entities. Each individual listed below	rectors of entity applying. Please include SSN for individuals must submit two completed fingerprint cards, personal/ all sheet of paper if necessary. For applicants that use a all entities and individuals.		
Name (First, MI, Last)	Title		
DOB SSN or FEIN	Number of Shares		
Address	Percentage of Ownership%		
Name (First, ML Last)	Title		
	Number of Shares		
	Percentage of Ownership%		
Name (First, MI, Last)			
DOB SSN or FEIN	Number of Shares		
DOB SSN or FEIN			
DOB SSN or FEIN Address	Number of Shares		
DOB SSN or FEIN Address Management Type:	Number of Shares		
DOB SSN or FEIN Address Management Type:	Number of Shares		
DOB SSN or FEIN Address Management Type:	Number of Shares Percentage of Ownership		
Address Management Type: □ Entity □ Individual □ Owner Provide the following information for each managem of the day-to-day operation for the business. Attack listed below must submit two completed fingerprint □ Gambling □ Alcoholic Beverage	Number of Shares Percentage of Ownership Not known at this time ent employee. If applying as an entity, include the manager ch management agreement if applicable. Each individual cards, personal/criminal history statements and fees. Both N/A		
DOB SSN or FEIN Address Management Type: □ Entity □ Individual □ Owner Provide the following information for each managem of the day-to-day operation for the business. Attack listed below must submit two completed fingerprint □ Gambling □ Alcoholic Beverage Name (First, MI, Last)	Number of Shares Percentage of Ownership		
DOB SSN or FEIN Address Management Type: □ Entity □ Individual □ Owner Provide the following information for each managem of the day-to-day operation for the business. Attack listed below must submit two completed fingerprint □ Gambling □ Alcoholic Beverage Name (First, MI, Last)	Number of Shares Percentage of Ownership		
DOB SSN or FEIN Address Management Type: □ Entity □ Individual □ Owner Provide the following information for each managem of the day-to-day operation for the business. Attack listed below must submit two completed fingerprint □ Gambling □ Alcoholic Beverage Name (First, MI, Last)	Number of Shares Percentage of Ownership		
Address SSN or FEIN Address	Number of Shares Percentage of Ownership		

A - FINANCIAL & OWNERSHIP INFORMATION

(Use additional paper if necessary)

1.	Do any listed owners have a financial or ownership i license?	nterest in any other gam	bling or alcoh	olic beverages
	□ No □ Yes (If yes, identify below)			
	Individual's Name	Business Name		
	Address			
	Individual's Name	Business Name		
	Address		_ Alcohol	□ Gambling
2.	Do any listed owners, through a business or family relagambling or alcoholic beverages license? □ No □ Yes (If yes, identify below)	ationship, share in the pro	fits or liabilitie	s of any other
	Individual's Name	Business Name		
	Address		_ Alcohol	□ Gambling
	Individual's Name	Business Name		
	Address		_ Alcohol	□ Gambling
3.	Do any listed owners have a financial or ownership into □ No □ Yes (If yes, identify below)	erest in an agency liquor st	ore?	
	Individual's Name	Business Name		
	Address			
	Individual's Name	Business Name		
	Address			
4.	Do any listed owners or their immediate family (spous affiliation to a manufacturer, importer, bottler or distribution in the second of the se	•		ents) have any
	Individual's NameAddress			
	Individual's NameAddress	Business Name		

5.	Do any persons or entities not listed as owners have an ownership interest in, derive income from or have liabilities associated with the business proposed for licensing? □ No □ Yes (If yes, identify below)					
	Individual's Name	Business N	ame			
	Address					
	Association					
6.	Has any listed owner ever been denied a gambling denial on an additional sheet of paper.) □ No □ Yes	ng or alcoholic bever	rages license? (If yes, describe the basis for the			
7.	Has any listed owner ever been issued a gambling or alcoholic beverages license by any other agency, state, nation or jurisdiction? If so, was that license ever subject to adverse action by the issuing authority? (If yes, describe the nature of the action and its ultimate disposition on an additional sheet of paper.) □ No □ Yes					
	Individual(s) Name	Date				
	Type of License					
	State City Cour	nty	Country			
8.	Provide the following information for all of the account(s), (i.e., saving and checking accounts). Institution Name	Address	_ Phone			
	Institution Name		Phone			
	Account Number	Address				
	Signatory(s)					
9.	Complete the following: □ N/A (check here if no transaction/purchase prices) a. Purchase price of real property b. Purchase price of personal property c. Purchase price of liquor license d. Total purchase price i. Earnest money deposit/down payment	\$ \$ \$ \$ \$	- - -			
	ii. Total amount paid at closing	\$	-			
	iii. Balance due in contractual payments	\$	-			
	Balance ade in contractad payments	2	-			

10.	Provide the following information for each outstand	-	•			
	institutional lender [NIL]) obtained or used for the pu	, , ,	•			
	copies of all loans/agreements/contracts/notes/let		· -			
	guarantees and trust indentures. Note: NIL (Form 13) r					
	entity who are not a state or federally regulated financial inst					
	lenders must complete a Personal/Criminal History Statement		ards and fees must be submitted fo			
	each individual providing financing. Use additional paper if ne	cessary.				
	□ N/A (check if not applicable)					
	Creditor's Name	Date Acquired	Date Due			
	Creditor's Address					
	Loan Amount	_ Loan Number (if applicable)				
	Creditor's Name	_ Date Acquired	Date Due			
	Creditor's Address					
	Loan Amount					
	Creditor's Name	Date Acquired	Date Due			
	Creditor's Address					
	Loan Amount					
	SourceSource	\$				
12.	Has the applicant filed a state and/or federal income	e tax return for the business	5?			
	\square No \square Yes (If yes, submit a signed copy of most recent)	filed state and federal income tax	returns)			
13.	Attach a copy of the applicant's most recent financi	al statements reflecting the	business operation for which			
	the application is being submitted. If the business is prospective or has been operating for less than one year, a					
	balance sheet and an income statement must be estimated. Failure to supply adequate financial information					
	will result in delay, denial or return of this application. You must include the following:					
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		mownig.			
	a. Balance Sheet listing all assets, liabilities and ow		mownig.			
		ner equity in business				
14.	a. Balance Sheet listing all assets, liabilities and ow	ner equity in business income and expenses for th	ne business			
14.	a. Balance Sheet listing all assets, liabilities and owb. Income Statement listing amounts and types ofAre there any persons or business entities that has	ner equity in business income and expenses for the large an option to purchase	ne business			
14.	a. Balance Sheet listing all assets, liabilities and owb. Income Statement listing amounts and types ofAre there any persons or business entities that haproperty?	ner equity in business income and expenses for the very an option to purchase copy of the agreement)	ne business any share of the business of			
14.	 a. Balance Sheet listing all assets, liabilities and ow b. Income Statement listing amounts and types of Are there any persons or business entities that happroperty? No Yes (If yes, complete the following and submit a Seller	ner equity in business income and expenses for the very an option to purchase copy of the agreement) Purchaser	ne business any share of the business of			
14.	 a. Balance Sheet listing all assets, liabilities and ow b. Income Statement listing amounts and types of Are there any persons or business entities that haproperty? \(\sum \text{NO} \sum \text{ Yes} \) (If yes, complete the following and submit a submit a) 	rner equity in business income and expenses for the very an option to purchase copy of the agreement) Purchaser Purchaser	ne business any share of the business or			
	 a. Balance Sheet listing all assets, liabilities and ow b. Income Statement listing amounts and types of Are there any persons or business entities that haproperty? No Yes (If yes, complete the following and submit a Seller Seller 	rner equity in business income and expenses for the very an option to purchase copy of the agreement) Purchaser Purchaser	ne business any share of the business o			

B – Building/Possessory Information

Do	es the applicant own the building proposed for licensing? No (If no, provide a current or proposed lease, rental or current or proposed purchase agreement showing the applicant has authority to operate in this location, including any other associated or related document. Note: A retailer is precluded from leasing property from a manufacturer or wholesaler of alcoholic beverages) Yes (If yes, provide evidence of ownership i.e. tax statement or deed and any other associated documents)
Na	me all persons or entities listed on:
1.	Lease Contracts □ N/A □ Sub-lease
	GCD will not approve a lease that provides for payment of a percentage of business revenue to any Lessor, except for a video gambling machine location agreement between a route operator and an operator. LCD will not approve a lease that provides for payment of a percentage of alcohol revenue to any Lessor.
	Lessor
	Lessee
	Sub-lessor
	Sub-lessee
2.	Do you have a Franchise Agreement? □ No □ Yes (If yes, provide a copy) GCD will not approve a franchise agreement which provides for payment of a percentage of business revenue. LCD will not approve a franchise agreement which provides for payment of a percentage of liquor revenue to any Franchisor.
	Franchisor
	Franchisee
3.	Purchase Agreements
	Purchaser
	Terms
	Seller
	Purchaser
	Terms

C – LICENSED BUSINESS ASSET OWNERSHIP

	Note: Ownership of an asset utilized in the licensed business by any person or entity other than the applicant requires a copy of a written lease and identification of the lease relationship in Section IV, Subsection B. No Section IV, Subsection B.
	Assets Owned Owner's Name
	Owner's Address
1.	Check all Gambling Activities that you plan to offer on the premises once licensed. □ N/A Disclaimer: You must obtain applicable permits prior to offering the activities. □ Video Gambling Machines □ Location Owned
	 □ Route Owned/Name of Route Operator (if known) □ To Be Determined □ Live Keno □ Live Bingo □ Live Card Tables
2.	Record Keeping a. Who maintains the applicant's financial business records? Name Phone
	b. Address
	c. Who prepares the tax returns, government forms and reports for the applicant? Name Phone
	d. Address Where are the financial books and records for the applicant's business kept? Address Phone
3.	Are there any unsatisfied civil judgments against the applicant or any persons or entities listed as owners at this time? □ No □ Yes (If yes, please explain)
4.	Has the applicant or any persons or entities listed as owners ever been a party to a lawsuit, either as a plaintiff or defendant? If so, provide a detail of each. □ No □ Yes (If yes, please explain)

PREMISES INFORMATION

Α.				t's premises:
				Have permanently installed walls extending from floor to ceiling?
	2.	□ No	□ Yes	Have a unique, clearly defined address that is not shared with another business (i.e., suite or
				unit designated)
	3.	□ No	□ Yes	Have another business operating out of the same premises?
				(If yes, name of the business)
	4.	□ No	□ Yes	Have a public external entrance that is shared with another premises for which a
				gambling operator license has been issued?
	_			(If yes, name of business):
	5.	⊔ No	□ Yes	Share a common internal wall with another premises to which a gambling operator
				license has been issued? If yes, explain and submit copy of the floor plan and also name of
	_		□ \/aa	operator's/owners:
	ь.	⊔ NO	□ Yes	Have a bar and at least twelve (12) seats at the bar, tables or booths independent of
				gambling machines?
В.				ne premises is located:
	1.	□ No	□ Yes	Are the entrance doors of the premises proposed for licensing on the same street as,
				and within 600 feet of, the entrance doors of a building occupied exclusively as a church,
				synagogue or other place of worship or school? (except a commercially operated or post-secondary
	_		_ ,,	school)
	2.	⊔ No	□ Yes	Is the premises located within 150 feet of another premises licensed for on-premises
İF	YES,	COMPLET	TE 3-11	alcoholic beverage consumption? (as defined in 23-5-629 MCA) Name of second location:
Z	2	□ No	□ Yes	Does the second premises already have a permit for placement of video gambling
Ĕ	٦.		□ 1C3	machines?
20	4.	□ No	□ Yes	Is there a structural walkway between the two premises?
¥	5.		□ Yes	Is the second premises licensee affiliated with the applicant? (If yes, please explain)
COMPLETE IF GAMBLING WILL BE AT LOCATION	_			
Ĭ	6.	□ No	□ Yes	Is there an immediate family member related to the applicant within the ownership
<u>0</u>				structure of the second premises licensee?
MEN.	7.	□ No	☐ Yes	Do the two licensed premises share any common management personnel?
Ĭ	8.	□ No	☐ Yes	Would the applicant be considered a parent or subsidiary business entity to the second
9				licensee?
핕	9.	□ No	☐ Yes	Does any person or entity within the ownership structure of the applicant share a
PE				commonality of business interest with any other person or entity within the ownership
Σ	4.0			structure of the second licensee?
	10.	⊔ No	□ Yes	, , , , , , , , , , , , , , , , , , , ,
ONLY	11		□ \/aa	and the second licensee?
				Are there any investors common to the applicant and the second licensee?
C.		-		ithin any of the following defined zones where:
	_		□ Yes	Sale of alcoholic beverages is restricted by city or county zoning ordinance?
	2.	□ No	□ Yes	Gambling is restricted by city of county zoning ordinance?
D.	ls t	he prei	mises:	
	1.		□ Yes	Ready for use
	2.		□ Yes	Newly constructed premises? (If yes, indicate an estimated date of completion)
	3.		□ Yes	Remodel of an existing premises? (If yes, indicate an estimated date of completion)
	4.	□ No	□ Yes	Operated under a concession agreement? (If yes, attach a copy of the concession agreement.
				Note: ARM 42.12.133 requires certain signage for a premises operated under a concession agreement)

PREMISES INFORMATION (CONTINUED)

E. On an 8½" x 11" sheet of paper, submit a floor plan showing the area to be licensed, using approximate dimensional measurements, including external dimensions and general layout. This floor plan must contain the name of the establishment, physical address and the alcoholic beverages license number (if applicable) and number of tables and chairs indicated. All alcohol storage areas and service areas should be labeled. Floor plan must indicate seating for at least 12 at a bar, table or booth independent of gambling machines. If you are applying for a restaurant beer/wine license, be sure the floor plan has the service bar area clearly designated as well as the kitchen and dining room labeled. If a patio is present, label it as well and include the height of the wall around the patio.

Section VI

ALCOHOLIC BEVERAGES LICENSE INFORMATION

Α.	Restaurant Beer/Wine			
		□ N/A		Does not pertain to the license I am applying for
	1.	□ No	□ Yes	Do you agree to serve beer/wine only between the hours of 11:00 am and 11:00 pm?
	2.	□ No	□ Yes	Do you understand that beer or wine may not be sold for off-premises consumption?
	3.	□ No	□ Yes	Do you understand that gambling may not be conducted on the licensed premises?
	4.	□ No	□ Yes	Do you agree to maintain a service bar where alcoholic beverages are stored and prepared for table service delivery to patrons for on-premises consumption?
	5.	□ No	□ Yes	Do you understand that consumption of alcoholic beverages is not permitted at the service bar?
	6.	□ No	☐ Yes	Do you agree to only serve beer and wine to patrons who order food?
	7.	□ No	□ Yes	Do you agree to ring up beer and wine sales separately from all other sales on each patron's bill?
	8.	□ No	□ Yes	Do you agree that the majority of the food you serve, excluding any carry-out business, will not be sold in throw-away containers not reused in the restaurant?
	9.	□ No	□ Yes	Do you agree to serve an evening dinner meal at least four days a week for at least two hours a day between the hours of 5:00 pm and 11:00 pm?
	10.	□ No	□ Yes	Do you agree that at least 65% of the restaurant's annual gross income will result from the sale of food?
В.	Wi	ne Ame	ndment	for On-Premises Beer License
		□ N/A		Does not pertain to the license I am applying for
	1.	□ No	□ Yes	Do you operate a restaurant or prepared food business? "Prepared-food business" means a restaurant, except the food need not be prepared on-site. (If yes, explain and attach a menu.)
	2.	□ No	□ Yes	Do you have a minimum of 12 seats at the bar, tables and/or booths? <i>Note: this does not include gambling machines.</i>
c.	Cat	tering Er	ndorsem	ent
		□ N/A		Does not pertain to the license I am applying for
		□ N/A		This license has an existing catering endorsement
	1.	□ No	□ Yes	Do you wish to add a catering endorsement to the All-Alcoholic Beverages License?
	2.	□ No	□ Yes	Do you wish to add a catering endorsement to a Beer/Wine license? (In order to receive catering endorsement, your business must be primarily engaged in providing meals and table service.)

Section VII

ALCOHOLIC BEVERAGES TEMPORARY OPERATING AUTHORITY

The Montana Department of Revenue, Liquor Control Division, may grant temporary operating authority to an applicant who requests a transfer of ownership. Temporary operating authority cannot be granted for the transfer of location of a license or for the issuance of a new license. *Please note that if temporary operating authority is granted for the alcoholic beverages license before a gambling license application is approved, all current gambling activities at the business must cease until a gambling license application is approved by the Department of Justice.*

I would like to have alcoholic beverages temporary operating au \Box No \Box Yes	thority issued:
Alcoholic beverages license number	_
To Be Completed By Applicant The undersigned applicant requests authority to operate per undersigned agrees that during the period of temporary operation pay for all alcoholic beverages for the business and must complete department rules. Temporary operating authority will be immediate any provision of the Montana Alcoholic Beverages Code	ng authority, the applicant shall be responsible to y with Montana Alcoholic Beverages Code and all diately revoked if the applicant or any employees
Signature of Applicant	Date
Printed Name	_
I would like temporary operating authority issued on	
To Be Completed By Recorded Owner/Current Licensee I authorize temporary operating authority to be granted to the application. I understand the applicant may not operate has been granted. I understand ARM 42.12.208 states in part arising out of a violation will be assessed against, and is the response.	the business until temporary operating authority, "Any proposed fine, suspension or revocation
Signature of Recorded Owner/Current Licensee	 Date
Printed Name	_

Section VIII

DECLARATION AND AUTHORIZATION

Ι,	, declare under the penalty of false swearing that I am
	rized representative of the entity making this application and that I have examined the
	ccompanying information, and that the responses provided herein are true, correct and
•	nis application or attachment(s) contains false information, I am subject to the criminal
•	le Annotated 45-7-202, 45-7-203 and 45-7-208, and/or revocation of any alcoholic
beverages or gambling lice	nses granted pursuant to this application.
I further authorize a full re	view, disclosure and release to any duly authorized officer, agent or employee of the
Montana Department of Ju	stice, Gambling Control Division, of any and all records concerning me that the Montana
Department of Justice pro	operly determines relate to my qualifications for gambling and/or liquor licensure,
whether the records are of	a public, private, or confidential nature.
Signature	
Print Full N	lame
Title/Posit	on
	-
Date	

This application must be completed in full, and all requested attachments must accompany it.

Delay, denial or the return of the application will result if incomplete.

Additional information may be required during the review of your license application.

Section IX

CHECKLISTS

Please submit the documentation required for your entity type.

Failure to provide all applicable documentation will delay the processing of this application. NOTE: For applicants that use a multiple entity structure, attach a diagram showing all entities and individuals.

Pai	tnership Agreement:
	Federal Employer Identification Number verification from the IRS
	For newly formed partnerships, attach a copy of the application/certificate for registration of the partnership
	filed with the Secretary of State
	For existing partnerships, attach a copy of the renewal of partnership filed with the Secretary of State in the
	Partnership name
	Verification of the Assumed Business Name as filed with the Secretary of State
	Personal/Criminal History statement(s) for each individual involved in the ownership of the license
	Two fingerprint cards and fees for each person (including officers and directors) involved in the ownership of the
	license
	Liquor authorization form to disclose tax information for each entity and its members, shareholders or partners
	with 10% or more ownership
Lin	nited Liability Company:
	Federal Employer Identification Number verification from the IRS
	Articles of Organization
	Organization Minutes
	Certificate of Fact or Certificate of Existence
	Verification of the Assumed Business Name as filed with the Secretary of State
	Other member agreements
	Personal/Criminal History statement(s) for each individual involved in the ownership of the license
	Two fingerprint cards and fees for each person (including officers and directors) involved in the ownership of the
	license
	Liquor authorization form to disclose tax information for each entity and its members, shareholders or partners
	with 10% or more ownership
Co	rporation:
	Federal Employer Identification Number verification from the IRS
	Articles of Incorporation and Amendments or Addendums thereto
	Bylaws and amendments or addendums thereto
	Certificate of Incorporation
	Certificate of Existence (for Montana corporations)
	Authority to do Business in Montana (for out-of-state corporations)
	Corporate Minutes and attachments
	Share issuance records
	Share Certificates
	Stock Ledger or Register
	Verification of Assumed Business Name as filed with the Secretary of State
	Personal/Criminal History statement(s) for each individual involved in the ownership of the license
	Two fingerprint cards and fees for each person (including officers and directors) involved in the ownership of the license
	Liquor authorization form to disclose tax information for each entity and its members, shareholders or partners

with 10% or more ownership

Cha	aritable/Nonprofit 26 USC. 501 Status:
	Attach a copy of the IRS letter of Nonprofit designation
	Federal Employer Identification Number verification from the IRS
	Personal History/Criminal History statement(s) for each individual involved in the ownership of the license
	Two fingerprint cards and fees for each person (including officers and directors) involved in the ownership of the
	license
Ma	nagement Information Checklist:
Em	ployment, Management and Other Agreement(s) and Contract(s). If you are applying as other than a sole
	prietor (i.e., Corp, LLC, Partnership, LLP, and the officers/directors/members/partners are the managers), duties must be covered
	the organization minutes or provide a management agreement.
	Personal/Criminal History Statement(s) on all management personnel
	Two fingerprint cards and fees for each manager
	ancial Information Checklist:
	Send signed copies of all loan agreements, contracts, notes and all related security agreements, guarantees
	and trust indentures. Note: NIL form must be filed with the application if any lenders or other sources of financing are not state
	or federally regulated financial institutions, including gifting statements
	Lease, rent, purchase option and financing agreements or other evidence of ownership of the real property
	(must provide documentation of any possessory interest in property where the business is operating). Provide any other
	documentation to verify source of funding for purchase of the real property, if applicable, including terms.
	Franchise agreements Figure (a) (i.e., bulgace about and income statement acting acting the business)
	Financial statement(s) (i.e., balance sheet and income statement or tax return for the business) Submit copies of all purchase desuments and related guarantees, mortgages, or security agreements associated
	Submit copies of all purchase documents and related guarantees, mortgages, or security agreements associated with the business proposed for licensing, all bills of sale, doods or other documents reflecting title transfer of
	with the business proposed for licensing, all bills of sale, deeds or other documents reflecting title transfer of assets purchased
	Purchase agreement for the liquor license including compensation, terms, the appropriate parties as buyer
ш	and seller and the license listed by number. Provide copies of all documentation to verify source of funding
	for purchase of the liquor license (e.g. 6 months of bank/investment account statements). Note: No assignments are allowed
	Bank signature card and authorization forms for all of the applicant's operating, investment or any other
_	business accounts (e.g. saving and checking accounts)
	Authorization for examination and release of information for NIL only
	Personal/Criminal History Statement(s) for NIL only
	Two fingerprint cards for each individual or each individual of the entity loaning the money
Pre	emises Information Checklist
	Floor plan (including business name, liquor license number, physical address, outer dimensions, seating, service bar, liquor storage
	etc.) Do not send in the original blue prints, only a copy of the floor plan.
	Zoning documents
	Certified Survey Affidavit (required for new license and transfer of location even if the license was previously licensed)
	Concession Agreement (if applicable)



GUIDE TO THE ALCOHOLIC BEVERAGES — GAMBLING OPERATOR COMBINED ON-PREMISES LICENSE APPLICATION

For the purposes of this application, **Gambling Control Division** is referred to as **GCD** and **Liquor Control Division** is referred to as **LCD**.

Apply online! https://revenue.mt.gov/apply-electronically

Our websites:

www.dojmt.gov/gaming www.revenue.mt.gov/home/liquor

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CHECKLISTS

The information in this guide is meant to assist you in completing the Alcoholic Beverages – Gambling Operator Combined On-Premises License Application. If you do not complete the entire application, it will be delayed, denied or returned. The information in this guide is not a substitute for a careful examination of the alcoholic beverage/gambling laws, rules and the rights or obligations arising out of applying for alcoholic beverages/gambling licensure, or for seeking, where individual circumstances warrant, the independent advice of a professional, such as an accountant or attorney.

Once the application is completed, send the original application and all required documents to:

Gambling Control Division 2550 Prospect Ave P.O. Box 201424 Helena, MT 59620-1424

> Phone (406) 444-1971 Fax (406) 444-9157

Processing an application generally takes three to four months based upon GCD and LCD determination of receipt of a complete application and if no deficiencies or protests are received. You will be notified by GCD upon receipt of your application and given a contact name. It is important to understand that supplying the information requested does not guarantee approval of the license application. Until a determination has been made, any expenses you may incur prior to receiving approval of your license application should be considered at your own risk. You will be notified when a decision regarding the application has been made.

If you are applying for an alcoholic beverages license it is the applicant's responsibility to determine if federal laws may require the applicant to obtain a permit from a federal agency. For further information contact:

Alcohol and Tobacco Tax and Trade Bureau

http://www.ttb.gov/ (866) 240-0835

Why the Combined Application?

Many of the requirements for alcoholic beverages and gambling licenses are very similar, and an alcoholic beverages license is a prerequisite to obtain some forms of gambling permits. GCD conducts the initial investigation of both alcoholic beverages and gambling licenses. Even though only a single application is submitted, the final decision to approve or deny the license application is made by LCD for alcoholic beverages licenses and GCD for gambling licenses.

What if I only want an alcoholic beverages license?

The combined application is designed so it can be used for a combined alcoholic beverages/gambling operator license application or independent licenses. There are check boxes for sections that do not apply to all licenses.

Who do I talk to about my application?

During the time your application is being processed, **all questions should be directed to GCD.** After an initial review of your application, you will be contacted by GCD and informed if additional information is needed or if the application is complete enough to continue processing. At this time you will also be provided with the contact name of the person in GCD assisting you. If for some reason you do not have the name of a contact for the application, call GCD at (406) 444-1971.

Fingerprint Cards

Two properly completed fingerprint cards for every required person must be completed and returned with the application. The individual can take the cards to a local law enforcement agency or to the Montana Department of Justice Division of Criminal Investigation for fingerprinting. Please note that some law enforcement agencies charge a fee for this service. This fee is separate from the processing fee that is required from GCD. Enclose the fingerprint cards and attach a check payable to GCD. If you have any questions, please contact the Gambling Control Division, Licensing Section.

There are two **SHORTER** application forms available for licensees that are making certain changes.

Combined Short Form (Form 37) may be used when:

- 1. There is a change among existing shareholders, LLC/LLP members, or partners who already hold 10% or greater ownership interest.
- 2. Increasing or decreasing shares owned by a shareholder who already holds a 10% or greater ownership interest.
- 3. There is a divorce and one of the owners no longer has an ownership interest and has to be removed.
- 4. There is a death of the licensee or shareholder, LLC/LLP member, or partner and an appointment of a personal representative of the estate.
- 5. Gifting of an ownership interest to an existing owner who already holds 10% or greater ownership interest.
- 6. There is a foreclosure and the party foreclosing has had no change in ownership since last licensed, is the licensee's immediate predecessor, is suitable for licensure, all applicable permit fees are paid, notified the department of the foreclosure at the time the foreclosure is executed and is within five working days of execution and the foreclosure takes place within two years following the sale.

Combined Short Form (Form 39) may be used when:

- 1. There is a change in the type of business entity, for example sole proprietor to a corporation.
- 2. There is a change in ownership parties, but no other changes to the licensee or licensed entity are made.
- 3. There is a transfer of a license from one location to another, but no other changes to the licensee or licensed entity are made.

PURPOSE & FEES

(Page 1 of Application)

Which fees do I have to pay?

While there are a variety of fees, you will likely only pay one fee for the appropriate alcoholic beverages license, one alcoholic beverages' processing fee and one processing fee for a gambling license. Catering endorsement, wine amendment, fingerprint and secured party fees may be required in addition to other fees.

The processing fees for alcoholic beverages and gambling licenses are collected in different ways. The alcoholic beverages license processing fee is a flat fee, but the fee for a gambling license is the actual processing cost for the application. Gambling collects an initial fee with the application, then collects any additional processing fees prior to any license and permit being issued, if any. If the fee is more than the actual cost of processing, the balance is refunded to you.

How do I calculate how much I will pay?

Complete Section I by checking the appropriate boxes relating to your application. Subsections 1-5 of Page 1 have associated fees. Mark the checkboxes according to your application type. Write the appropriate fees in in the "Enter Amount Due" column. Once all subsections are complete, add the numbers in the "Enter Amount Due" for the total and enter that amount in the appropriate field.

How much do new all-beverages licenses cost? (This includes nationally recognized Fraternal Organizations)

For establishments located at least five miles outside of incorporated cities and towns \$400

For establishments located within five miles of an incorporated city/town:

a) of less than 2,000 population	\$400
b) population between 2,000-5,000	\$500
c) population between 5,001-10,000	\$650
d) population of more than 10,000	\$800

Nationally Chartered Veterans Organization \$250 - \$650, depending on population and is assessed at \$150 less than the above fees.

Original Resort License \$20,000 one-time fee

What if I am unsure of the exact type of new alcoholic beverages license that I need and license fees?

Call the Department of Revenue at (866) 859-2254 to find out about the availability of licenses in your area and the appropriate license for your plans.

Section II

GENERAL INFORMATION

(Page 2 of Application)

What is the difference between a business name and an entity name?

The "business name" is the "DBA" (doing-business-as assumed business name as it is filed with the Secretary of State) or name you call your business. Your business name is also the name that normally appears on the sign advertising your establishment. The entity name represents the legal holder of the license (e.g., corporation name, individual's name, partnership name, etc.).

What address should I use?

The address is the physical address where the business is located. For the premise, list the actual street address for the business and for the mailing address, list where you want the mail from both GCD and LCD to be sent.

Federal Employer Identification Number?

You must provide verification from the IRS of your FEIN. If this is not provided, the application will not be processed.

Section III

OWNERSHIP & MANAGEMENT INFORMATION

(Page 3 of Application)

Who would be considered a manager?

A person employed or authorized by the licensee to manage the liquor and gambling operations. A hired manager who is not part of the corporate structure or ownership of the license is required to submit a management agreement, as described in Administrative Rules of Montana 42.12.132.

If I am the sole proprietor, shareholder, member, partner, etc. Do I need to be reported as the manager and still file a management agreement?

If you are a sole proprietor, you do not need to submit a management agreement. If an entity will own the license, you will not need to file a management agreement if your organizational documents designate you as a manager of the licensed operation.

What will this information be used for?

This is to ensure all ownership interests are correctly reported to the divisions. This will help the GCD and LCD determine if all ownership interests and liabilities have been reported to us about your business. It also allows us to know who is authorized to sign documents for the business.

FINANCIAL INFORMATION

(Page 4 - 8 of Application)

Can I own more than one liquor license?

A person may not be issued more than three all-beverages licenses, with the exception of a secured party issued an additional all-beverages license as the result of a default. A secured party must transfer ownership of any additional all-beverages license within 180 days of issuance.

What is a financial or ownership interest?

You have a financial or ownership interest in a business if you share in the profits, losses and liabilities of the business. This includes co-borrowers on business-related applicant loans, persons whose assets are cross collateralized with those of the applicant (they let the applicant use their assets to secure a loan and lose those assets if the applicant defaults), persons who may be found in default under an obligation if the applicant defaults under a related agreement and vice versa (cross defaults). It also includes franchise fee recipients or any other person with an interest in a percentage of the applicant's sales or income. This is not an all-inclusive list. (This does not include gambling machine route operators who by statute may receive a percentage of gross video gambling machine income or a fixed fee for leasing machines to the gambling operator.)

What is a NIL form (Form 13) and why do I need one?

A Non-institutional Loan (NIL) form (Form 13) is used to report loans from someone other than a state or federally-regulated financial institution. It is also used to report deferred payment agreements, gifts, or the transfer of a security interest. (e.g., a relative wants to lend money to a licensee that owns the license.)

Why do I have to report funds that I loaned to the licensed business when I am a shareholder, member, partner? GCD and LCD are careful to examine all liabilities/sources of funding of the licensee in order to safeguard the integrity of the alcoholic beverages and/or gambling licenses.

What does "Gifting" mean?

"Gifting" is defined as a licensee receiving funds from a non-institutional source of financing who does not require those funds to be repaid, and does not expect anything of value in return. The non-institutional source of financing must also provide a signed "Gifting Statement" declaring the above agreement.

Section V

PREMISES INFORMATION

(Page 9 of Application)

What are the general restrictions on premises?

Generally speaking, the premises needs to have permanently installed walls extending from floor to ceiling, an address unique to the establishment, and a public external entrance that is not shared with another premises for which a gambling operator license has been issued, and may not be within 150 feet of another gambling establishment owned by a related party, or within 600 feet of a place of worship or school. If applying for a new license or a transfer of location of an existing license, a certified survey affidavit from the city surveyor or private land surveyor attesting to the suitability of the proposed premises also needs to be included with the application documents.

Section VI

ALCOHOLIC BEVERAGES LICENSE INFORMATION

(Page 10 of Application)

What is the difference between a beer license with wine amendment, and a restaurant beer/wine license (RBW)? A beer license with wine amendment does not have the food, service and hours requirement that a restaurant beer and wine license does. This license must meet the standards for an establishment operated either as a prepared food business or a restaurant.

An **RBW** is a license created specifically for a restaurant business. There are several restrictions that do not apply to a regular beer license, such as an RBW cannot have gambling, there can be no sales of alcohol for off-premise consumption, alcohol can only be sold to patrons who order food, the hours of operation are restricted to 11:00 am to 11:00 pm, it must be open at least four nights a week for two hours each between 5:00 pm and 11:00 pm, and the majority of food sold is not in throw-away containers that are not reused in the restaurant.

How can my restaurant qualify for a wine amendment?

If you currently hold an on-premises consumption beer license, you will need to document how the sale of wine for on-premises consumption would be supplementary to a restaurant or prepared-food business. You will also need to have seating for 12 customers at tables and/or booths.

What can I do with a catering endorsement?

A catering endorsement allows a licensee to sell alcoholic beverages to persons attending a special event at a location that is not otherwise licensed for on-premises consumption. The licensee may not cater an event at which the licensee is the sponsor. The catered event must be within 100 miles of the licensee's regular place of business.

Section VII

ALCOHOLIC BEVERAGES TEMPORARY OPERATING AUTHORITY

(Page 11 of Application)

What is temporary operating authority (TOA)?

TOA allows an applicant to operate the proposed business while the alcoholic beverages license application is being processed. TOA may only be issued to an applicant who requests a transfer of ownership. The granting of TOA does not guarantee LCD will approve the application. TOA does not mean the current licensee is absolved from any liability of the liquor operation. If the applicant violates any portion of the Montana Code Annotated or department rule, TOA will be revoked. Any proposed fine, suspension or revocation arising out of a violation will be assessed against, and is the responsibility of, the recorded owner of the license.

There is no temporary authority for a gambling operator license. If the establishment is currently licensed for gambling, all gambling needs to cease once TOA is issued to the applicant, until GCD has received, processed and is ready to approve a gambling operator license to the applicant. Final approval of a gambling license can be granted while the applicant is still on TOA issued by LCD.

Section VIII

DECLARATION & AUTHORIZATION

(Page 12 of Application)

Who can sign?

Depending on how you are applying (i.e., individual, corporation, partnership, LLC, LLP, or nonprofit), the person(s) listed under Section III, "List all owners, partners, members..." are considered authorized representatives and need to sign the application.

What is conditional approval?

Conditional approval means the investigation has been completed and the applicant and the proposed location for the premises meet all requirements for licensing, but there are outstanding issues preventing final approval of the application (usually the issue is that the premises are not ready for occupancy). The conditional approval letter is sent by LCD and gives the applicant a timeframe, in which the situation must be resolved, or the premises must be done, a final inspection completed, and approval of health, building and fire code officials are obtained. Conditional approval does not constitute the issuance of a license.

Section IX

CHECKLISTS

(Page 13 – 14 of Application)

Checklists are designed to help ensure that required documentation is included with your initial application. Submitting a complete application will assist in the timely processing of your application.